



54th JMSA Annual Dinner
REGISTRATION FORM

Registrant name (*full name and titles*): _____

Japanese name (in kanji, if applicable): _____

Company name: _____

Address: _____

Email address: _____

Contact Telephone: _____ Cellphone: _____

BENEFACTOR LEVEL

_____ **Platinum:** \$10,000 and over

_____ **Gold:** \$7,500 and over

_____ **Silver:** \$5,000 and over

_____ **Bronze:** \$2,500 and over

INDIVIDUAL LEVEL

_____ **Single:** \$500

_____ **Couple (for two):** \$1,000

_____ **Student/Trainee:** \$100

Note: For those who check any one of the **Benefactor Levels**, please note the following:

1. If you purchase Platinum, Gold or Silver Level tickets and wish to attend the dinner, we are pleased to welcome ten (10) persons as our guests for the dinner table. In this case, the non-deductible amount will be \$350 per person based on the regular single ticket price at \$500. Therefore, the total non-deductible amount will be \$3,500 per table. Accordingly, you may deduct as a charitable contribution as follows:

(1) Platinum: You may deduct \$6,500 in total after subtracting \$3,500 from \$10,000

(2) Gold: You may deduct \$4,000 after subtracting \$3,500 from \$7,500

(3) Silver: You may deduct \$1,500 in total after subtracting \$3,500 from \$5,000

2. If you purchase **Bronze Level**, we are pleased to welcome five (5) persons as our guests for the dinner table. In this case, your total non-deductible amount will be \$1,750 (\$350 x 5). Therefore, you may deduct \$750 after subtracting \$1,750 from \$2,500

3. Please make your check(s) payable to: “Japanese Medical Society of America” or “JMSA”

4. If you have any questions, please directly contact: Mr. Yoshio Kano, Executive Secretary, JMSA
Tel: (914)433-3210 / Email: jmsaevents@jmsa.org